Idiopathic Thrombocytopenic Purpura

- Immune mediated, with antibodies against Platelet membrane glycoprotein., causing ↓ Platelets.

Pathophysiology

Hemostasis - Step 1 → Primary Hemostasis → By Platelets
Step 2 → Secondary → Coagulation by clotting factors with fibrin.

- Spleen → Autoantibodies → Destruction → ↓ Coagulation
IgG of Platelets. ↑ Bleeding.

Clinical Features

Acute → Children after Viral Infection, resolves with 2 months
Chronic → Women of Reproductive age.
Primary → No underlying Cause.
Secondary → By HIV, Hepatitis C.
- Usually asymptomatic, Purpura → Red/Purple spots, 0.3-1 cm Diameter. In Severe cases frequent mucosal bleeding like Epistaxis, metorrhagia.

Investigation → Diagnosis of Exclusion

CBC → Normal WBC, Normal RBC or Hb. ↓ Isolated Platelets ↓ 50 x 10⁹/L.
- USG Abdomen → Splenomegaly.
ELISA, HbsAg, → Hepatitis.

Treatment

- > 30,000 - No treatment, recover spontaneously.
≤ 30,000 → Splenectomy, Intravenous Immunoglobulin,
- Increasing platelets.